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NO 17

Inaugural Dissertation

On

That species of Uterine
Hæmorrhage, called
Accidental,

During Pregnancy,

by

William Lewis

of Virginia

1797
1800

1801

1802

1803

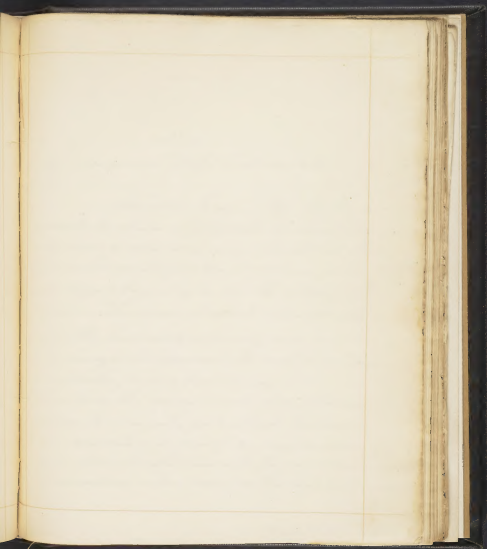
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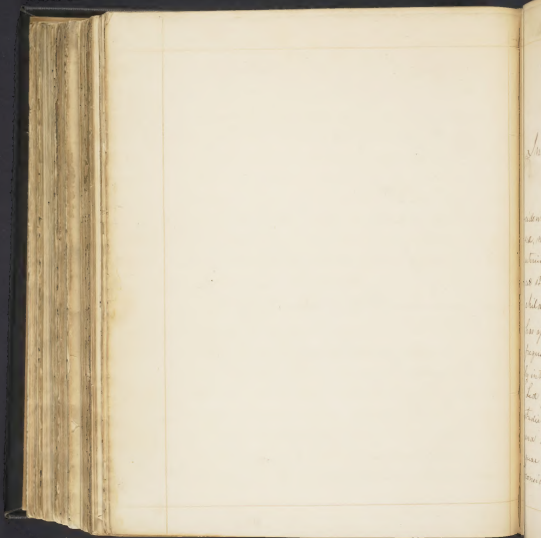
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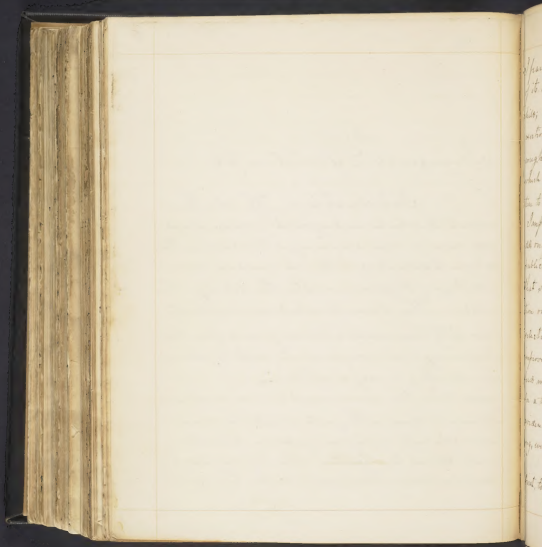




An
Inaugural Dissertation &c.

Introduction. - Of all the incidents to which a pregnant woman is exposed, none is more alarming or troublesome, than uterine hæmorrhage, when it occurs in advanced stages of pregnancy, or after the delivery of the child. - This, from its extent and impetuosity, has aptly been called a flooding; and from the frequency of its occurrence, it must be extremely interesting to every practitioner.

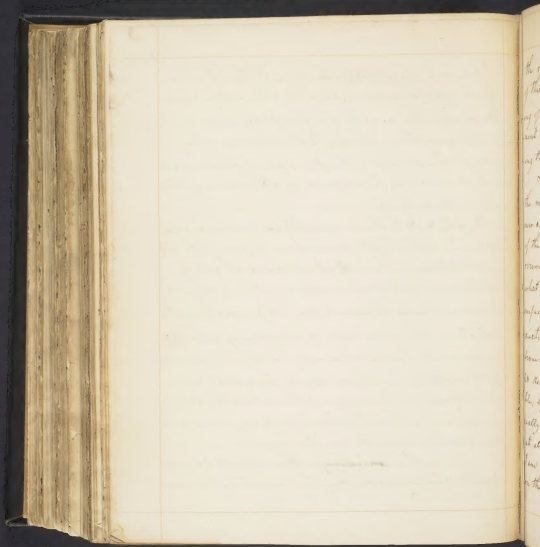
Lead from the commencement of my medical studies, to view with great interest, the diseases and accidents of pregnancy; no one presented equal claims to attention with the now under consideration. - This arose from the high, (and



I fear not exaggerated estimation, I then formed of its importance and danger to both mother and child; and the necessity of a promptness in all our exertions in their behalf; that requires a thorough knowledge of the principles of practice, and which could only be acquired by extraordinary attention to the subject. -

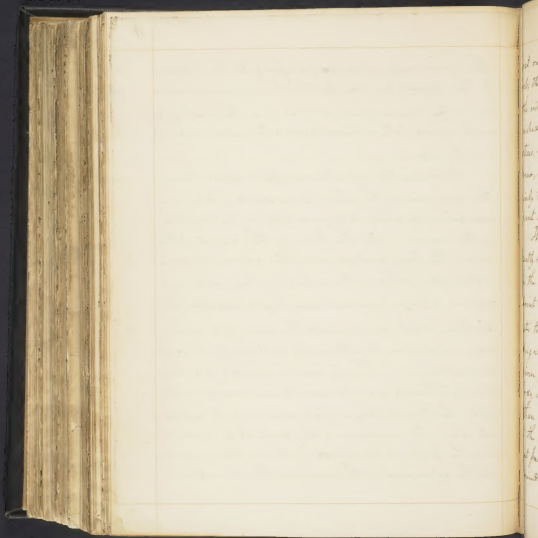
Impressed with these views, I have ventured, guided only by the light drawn from a few of the best publications on the subject; unaided at all by that sure light of experience, to offer a dissertation on uterine hæmorrhage. - In making this selection, the vain hope of introducing novelty or improvement has had no influence; but I have confined myself to be swayed only, by an ardent desire for a thorough knowledge of the subject, the best evidence of which, I could offer to my understanding, was to be derived from this source. - - -

In considering this subject, I propose first, to give an account of the connection between



the ovum and uterus, as necessary to the history of this disease; and as essential to a proper understanding of the means operant of some of the most efficient means, both natural and artificial, in arresting the same. -

Immediately after the successful application of the mare serum, the uterus is discovered to take on a new action; by which it prepares itself for the reception of the ovum. - At the time of the descent of the ovum, the body and fundus of the uterus are somewhat enlarged; and the whole of their internal surface is lined by a new, and highly vascular pro-suction; which has received the name of a membrane; and from its ultimately falling off, it is called decidua. - This by some is described as a double; by others as a single membrane; and some, especially the French physiologists, even deny its existence at all. - The medium of the connection of which I am to speak, is furnished by this substance; which, on the appearance of the ovum in the uterus, throws



set on it intense action, a 'violent growth' usually; the extreme is: which, some are carried into the extremes of these. It is then on: which the same is the in the insect themselves in their entire form, between the spots of the medium. - Thus the more matter the more, the more can be sacrificed with a portion of the other; it being the result of a great operation.

This adhesion, however, it may be expected, is in
 itself very casual, and is a continuous process, continually
 with the entire membrane, increasing. It cannot, it ap-
 pears, be destroyed without a flux of blood, deeper than
 to the extent of the separation, and the healing
 is, very, - a separation of the membrane, and
 again is lost in the early months, happens in the
 body a process of the others, and quite immovable,
 than when it occurs in the world. This is owing
 to the degree of development going on in these differ-
 ent parts, at different periods, blood being always de-
 manded to a part in a much earlier to the ripening of



that group.

By a majority of authors it is believed, that no fatal hemorrhages can occur without the separation of the placenta, and among them I find 3^d Quercus adding the following words: "By a few it is believed, that a mere separation of the membranes was sufficient for this purpose; but if this we have no good evidence — and should it be even true, it can only apply to this accident after the fifth month for until this time, the whole uterus may be considered as being lined with placenta." Mr. Keen on the contrary entertains a different opinion; and thinks haemorrhage to flow from a detachment of the placenta, when it is placed high up, is a rare occurrence. —

Causes. — These are 1st mechanical violence of different kinds. 2nd various passions or emotions, with mind. 3^d Effluvia. 4th & 5th these cause undoubtedly act directly, in increasing the rapidity and force of the circulation, but they do this in different ways. The augmentation arising from mechanical violence



is perhaps at first always rare in the uterus, whilst that arising from passion or emotion of the mind, or hysteria, is so universally general. This, I think, accounts, in fact, satisfactorily, for a circumstance, that has frequently been observed with regard to a woman - namely, that the pulse is always frequent and more diffused, when the uterus is rising to its exalted position, than when it is fixed in the lower position adapted to the quiescent state of the organ. There is station and tension to the organ, but a tension is induced, not a local increase of the circulation.

This augmentation of the circulation has generally been considered a requisite to the formation of the placenta, which is frequently seen to follow it; and then has a farther explanation. These notions appeared very anciently. The correctness of this opinion has lately been called in question, by Dr. J. D. Jones in his valuable work on Midwifery. He considers it at least as but an indirect cause, bringing on uterine contraction, to the immediate effect of



which, the separation of the membranes in the earlier, and the placenta in the later months, together with the consequent hæmorrhage, are all attributable.

Some periods of pregnancy are much more liable to flooding than others, and this is peculiarly the case in the early months. - Dr. Denon says, this accident may occur at any time after the fourth or fifth week, the adhesion between the uterus and ovum being forthwith established by that time. - We have heard of copious discharges from the impregnated uterus at an earlier period than that, and even before the ascent of the ovicle into its cavity. -

But if this disease is most frequent in the earlier months, it is much more dangerous to the mother in the later periods. This arises from the larger size of the ovicle quitting it; the effect of flooding being always in proportion to the rapidity of discharge. Though early flooding are less dangerous to the mother, they are infinitely more so the father; and in this point of view claim the chiefest attention of both the



another and practitioner - The former, ignorant that this is one of the surest signs and most certain precursors of abortion is apt to conceal her situation from a false modesty; whilst the latter is led into false security, from the supposed innocence, or even advantage of early discharges from the vagina. There are dangerous errors, that should be speedily corrected. To the one, it will be sufficient to point out the danger of procrastination: the other must be taught the true estimate of a leucorrhoea in relation to the parent and foetus.

Precious to detailing the treatment of this malady, it will be proper to divide the time of its development into periods. - The modification imposed on the treatment by the period, at which the leucorrhoea occurs, renders a division necessary, and by adopting it, I shall be enabled more clearly to point out the dangers attending its occurrence at the different advancements of pregnancy; the indications offered by the same, and the best methods of fulfilling them. - The division adopted by me is the same as that of Dr. Ferrus, though



I am not certain, it has any advantage over that adopted by Dr. Barrow in his compendium. The first period will include about four and a half months of the term of pregnancy; the second will embrace the delivery of the child. -

First period. - Having previously had occasion to remark, that haemorrhages occurring within this period, though less dangerous to the mother, were much more so to the foetus, I shall not repeat it here; but proceed to remark on the indications from each particular circumstance of the case. -

Amidst the conflicting opinion of authors, and in the absence of all experience, it has secured the station of the highest faculty for reasoning, to determine the many most points, connected with this part of the subject. - by the comparative danger to the foetus of haemorrhages, procured by mechanical, or internal, obscure causes. I have already ventured an opinion; which though sanctioned by Dr. Druce, is as directly contradicted by Barrow. - The consequences resulting from the place of



liver are very green; for the accident recurring in the
 last part of the uterine growth, must necessarily occasion an in-
 creased separation of the membranes & the increase, below the
 cord can form an outlet. Thus, occurring in the adven-
 ture months: a relation, might possibly give rise to small
 hæmorrhages, from the very firm adhesion of the sides of
 the placenta: but during her tedious birth, the adhe-
 sion is so delicate, and the uterus so easily thrown into ac-
 tion, that a very slight accumulation, blood behind the
 membranes, is quite sufficient to bring on profuse em-
 bryonic: which a drain is directed.

The quantity of blood excreted, is small can form no
 positive frequency in the cases since the woman has been
 cast off without the help of many remedies whilst it has
 been increased after the loss of so many periods. Longers
 it with other constitutional symptoms, it always remains
 in the chance of generating and however strong arguments
 for directing our actions very much to its diminution.

Except the symptoms of death of the fetus none argues
 life formally than uterine contraction, particularly if

the attainment of perfect health. Thus, when regularly and universally established, are so difficult to subvert, and so generally exist in epidemic, as to induce a belief in some that they are indomitable. Among this number Mr Burns stands most conspicuous, and we have scarce encountered in this point. Opposed to his assertions, we have the testimony of a number of cases by different authors; but are not more decidedly in the point, than those by Mr Burns himself. In that case, what by him, the disease can be cured so violently, as to render our patient, and yet carried on even to the proper time. Nor can we form a more certain prognosis from examinations in vaginam. The os int. is usually united in some time to the body, and remains of the disease, from the state of the cervix; but when the neck is relaxed, the rupture of the uterus will soon follow.

It results, therefore, that the death of the uterus is the only certain indication of epidemic, and to determine this, with certainty, is indeed some point. In this case we are obliged to content ourselves with circum-



such evidence, being deprived of the means of more positive testimony. - If these circumstances be the sufficient reason or motive, and it is evidently the least, after being known and known as to be looked on as the least equivocal. - If we add to this, the position and simultaneous position of the missing sickness, and subsistence of the at dominant human, no reasonable hope can longer be entertained. -

From what has been said we learn the immediate fact, that reason implies that it may be to determine a priori, the degree of success, that is, a ^{very} small one, and that it can rarely be done. - From this may be deduced a rule worth upon, and that, which I wish to impress, is at every to act as if the case might be made to terminate favorably. - By pursuing such a course much may sometimes be gained, and nothing can ever be lost.

I discharge myself by being in regard to the next, negatively, and in and concluded by the last authority to look with suspicion, at what are considered the regular returns of catarrhs, from the impugnable return, and



to treat them as if something mischievous might result. No doubt this is the governing principle of practice in a first attack; but should the haemorrhage return, we should direct our care to the same end. This, in-
-deed the strictest attention to facts is very apt to show.

Mr. Burns says, the membrane rarely, and, when ruptured, is any extent; the placenta remains. This is a subsequent attack more easy, and the prognosis less favorable. But that haemorrhage has occurred so often, once each week, and even month after month, as the woman carried to an improper reckoning; and has gone into history, - a new point to the most important part of my subject, namely, it

Treatments within this period. The indications, which present themselves, are then, 1st to restrain the haemorrhage; 2nd to subvert uterine contraction, and 3rd to prevent the recurrence, either.

In the first and most common manner it is accepted, is by the use of ergot in the form of powder. In the second, a mixture should be prepared, or a solution, or







The first thing I noticed when I stepped out of the car was the cold. It was a sharp contrast to the warm blanket I had been sitting under. I looked up at the sky, which was a deep, dark blue, and felt a sense of peace. The stars were visible, and I knew that I was in a good place. I took a deep breath and felt the cool air fill my lungs. I was alone, but I felt like I was part of something bigger. The night was quiet, and I could hear the soft rustle of the leaves on the trees. I was in a good place, and I knew that I was exactly where I needed to be.









The first of these is the fact that the human mind is not a blank slate, but is filled with a vast amount of information, both from the senses and from the memory. This information is not organized in a logical or systematic way, but is rather a jumble of impressions and ideas. The second fact is that the human mind is not a passive receiver of information, but is an active processor of it. It takes the raw material of the senses and the memory and organizes it into a coherent whole. The third fact is that the human mind is not a single entity, but is composed of many different parts, each of which has its own functions and characteristics. These parts are the senses, the memory, the imagination, the reason, and the will. The fourth fact is that the human mind is not a static entity, but is constantly changing and developing. It is shaped by the environment, by the experiences of life, and by the efforts of the individual. The fifth fact is that the human mind is not a purely rational entity, but is also a creature of emotions and passions. These emotions and passions are not irrational, but are a necessary part of the human mind, and they play a vital role in the process of knowledge.



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The most common and immediate occasion of the disease
 is the natural obstruction is easily struck in the uterus.
 The disease is the same in all individuals but the time to
 manifest itself for its duration, the embryo is very liable to es-
 cape which is sometimes not obtained. This belongs to the
 common or simple and to a rare degree and is known to be
 it, much earlier. Some authors recommend the rupture of the
 membranes so early as the third month, but independent of the
 risk it & without, against it, the termination of a disease can
 that came within my knowledge, in which this spontaneously
 took place, at this period, has convinced me, that it should
 always be carefully avoided. - It seems undoubtedly, to be
 in the commencement of the fifth month, unless the flood
 is very profuse, the pains very urgent, and the uterine
 fully well opened. The absence of either of these circumstan-
 ces will render it highly improper for if the flooding is not



[illegible]



and more more than two fingers. When a large portion of the membrane is within the os linear, they may be removed by the action of two fingers within the vagina; but when this is found nearly or entirely contained within the cavity of the uterus, the fingers will be found inadequate. I have such an instrument as Dr. Davis has used with great success & some success. This instrument, very simple in its construction and execution, is introduced into the vagina on the fore finger of the left hand, forcibly carried up to the os linear. The hook is then gently moved up into the cavity of the uterus as high as the os linear; and as gradually withdrawn, when it will be found to have entangled in the membrane and brought them along with it. On their removal, the flooding has ceased almost immediately; and in this way he has delivered the lives of several women. In cases of not so much emergency he has used successfully the wight in scruple above; but in the case to which I alluded before, as coming under my knowledge, it completely failed after the total employment of the lancet.

Second Period. - This I have said will embrace the remaining time to the delivery of the child. - It is evident



and the remarkable hemorrhage may ^{vary} a little in the different months of the period: since in the two first the development of the ovum is scarcely begun; whilst by the commencement of the ninth it is nearly completed: - but a farther division seems objectionable from the nature of the matter, and is much unnecessary. The part of the period is exempt from this accident, and the amount of flooding will be in order for the extent of the relaxation and the advancement of pregnancy. - The safety of the mother has always been considered in a more rational ^{the} group of this view. - It is in floodings at this period, that all we sometimes or are required by medical science to demand, - is, for a few gushes of blood may determine the fate, & turns her into a state of extreme exhaustion or syncope, by which a dark white is obtained, that is too often fallacious. -

Now are we to consider our patient more in danger, because the discharge is not abundant? - all late writers, as Bandelone &c. seem to sanction the opinion of fatal intra-uterine hemorrhage. - The blood may be retained behind the placenta, or membranes, and sometimes by the natural contraction of the neck of the uterus itself, which is not yet, for at the time



The *intermenstruation* takes place. This concealed hæmorrhage is sometimes brought on by fatigue, flow or violent shaming; and is generally accompanied by a dull heavy pain at the part where it occurs, resembling the *Menstruæ*. The action affecting the blood becomes disturbed and slow, producing a sensation like colds the woman gradually loses her strength, and finally becomes *clandestine* pains are ultimately diffused, which most frequently are accompanied by the evolution of coagula. Bandeau relates the case of a woman, who discharged more than a hat worn full of a red colour. In such cases, nothing but opiate, indicating the virus can save the patient.

In treating an *oppressed hæmorrhage* at this period, the indication are exactly the same as in the former; but the means of obtaining the cure is with, as we have seen how to treat most by to the plug and delay. The first and most important duty is to sustain the discharge as quick as possible, that there may be obtained to stop such means, as the nature of the case may demand.

Having imposed a system of the most correct one, the subsequent parts of which have been before detailed we should



bound immediately to make ourselves acquainted with the circumstances of the case. In this process of examination we may have almost to repeat what we have advanced the first of the cases and then to enter the conclusion is placed before we take the first of the cases, i. e. the case, the whole process is repeated. The second case, the third, the fourth, i. e. in place of the first case are all identical. The process, however, is repeated until we have reached the end of the process. The method is correct.

the necessity of the matter for the success of the first meeting in a general principle would present with some attention of the
- being. - Valuable ideas in the management of this accident
in the earlier months, it is seldom admissible and sometimes
is a true principle, especially in the latter part of the first time,
as the cause of the connection between the violence and
unhappiness of the feelings, in so much as to show in pattern of
and behind the work of the mind. But should the appearance
of the case require, such as a moderate degree of the full, the
- time that of the mind, indicated by the rules, the first signs
and means for form is unimportant for the contrary is
should be considered a sign and not a member. But must



riated, this is rarely the case; for before we arrive at the point where
 of the flooding has generally made such increase in the strength
 of the patient, as to render the preservation of even a few ounces
 of blood an important measure.

Limited in the employment of blood-letting, we should re-
 main a more cautious person in the application of cold. De-
 termining on the necessity of its previous employment, it should
 be obtained at as low a temperature as possible. The best me-
 thod of embolizing it, I have already detailed, and shall only
 again repeat a decided preference for powdered ice-cream
 in that case. The advantage of this plan must be evident;
 since we obtain by it the highest benefit of the remedy, at the
 least expense of comfort to our patient.

Thus recommending the cold employment of it as enough a
 remedy in an active stage of an attack; I am nevertheless, per-
 fectly sensible, that it should not be postponed in regard to
 of the combined effect of this and the flooding on the system.

Regulated with discrimination, it may be made an im-
 portant remedy in nearly every stage; but when rashness is
 permitted to usurp the seat of cold and enlightened discer-



tion, it becomes an efficient agent to the flooding in hasten-
ing the unwholesome close of life. Therefore, carefully watch-
ing the progress of the operation, we should immediately moderate
the force of our applications, on the appearance of much acute
debility. I know there is danger in using this form of opium,
but it is now in contradiction in its effects when
it arises from the acidities, incident to the effects of
flooding in the stomach. Otherwise, the quantity of opium
lost, combined with the constitution of the patient, is such, the
brain feels and the surface cold, the further energy is used
this union should be regarded dangerous. At length,
however, it may be made to turn the application in a me-
dical sense, we should never neglect to counteract the debility
influenced by the application. Other warm water
warm flannels to the extremities, especially the feet and when
exhaustion is total exhaustion, which it is unnecessary to
hesitate and breast, to determine it was indicated in a
blanket and other stimulating applications.

Opium is very highly recommended by some of the Eng-
lish writers particularly by Dr. Hamilton of Edinburgh, and



Mr Burns of Glasgow. The latter gentleman prescribes them invariably in a first attack, where we have it not in contemplation to destroy the venereal immediately. He says, "in this not very long experience enables me to speak with assurance and in confidence in every instance, where the inflammation does not descend in situation, the result is a few days of Lardium which dissolves the tubercle which produces and cures the same. The discharge is white the whole is over the next day the patient with scarcely even a full dose of Lardium, are on their feet in a moment in resuming the practice." But he stands the same as in the venereal in which it is not in the same the same can account for it. Dr. Ferrius Lovers, says, it never in our hands has been in the smallest communication, or met with the slightest exception. He accounts such contradiction as it is difficult without supposing the account of the one incorrect, or the other not to have given the remedy a fair trial. It is in most of the instances, so far as an inflammatory cause is being a subject. First cases do not arise in which specific are valuable. Lardium, or a mercurial, should be rejected & banished; but that this can be in every instance is still left doubtful. It is in our power to distinguish the case



[illegible]





operation. This, a few cases, before hemorrhage, occurring in the
 advanced stage of gestation, can be cured in time delivery or other
 means. In, delivery. This shows that a moderate, steady
 is necessary after the operation. In black, a plaster to prevent
 is a mean. Perfect coagulation. mind not long a candle able
 much from any thing. But now, the system, a peculiar vas-
 cular action, whereby much blood, in a short, but previous at-
 tempts to be a good article. hemorrhage, and in the case of
 it is not to be applied to the whole body, but to the parts only. This
 but can be done in such a way. In the case of the whole, it may
 be an intention to guard the patient against the event. This may
 nearly succeed, and in ultimate safety is not. I depend on delivery.

As necessary to the success in obtaining the hemorrhage, in
 all the other means employed, so is this only auxiliary to deliver, under
 the the common legend danger. Under this is a note. The ad-
 vance. In this should never be forgotten, that it never is seen
 in nature as but a slow exposure to the the vagina in the
 removal of the discharge.

I come now to speak of delivery as a means of arresting bleeding
 and securing the patient.



persons to the institution, & the number and quarters, always was on all occasions attended, as the subscribers society. - By reason of the sickness with which it began, which the children & job, some were, and in such a manner almost their hands through the neck of the victim, and extracted the father, whilst others were content with examining the membranes, making the exposure a whole forenoon, and finding me unwilling to participate, again to take the case out of my hands. The result of this ill-fated practice was frequent cases of abortion, or a train of fatal or exceedingly painful consequences.

The practice, therefore, of Fugos, (as it is called), as it sometimes occurred alone, was a material improvement on that which led to it. It was the principle of practice, at present established, have condemned its indiscriminate employment; and even brought its utility into very confined limits. Its frequent failure to close the bating vessels, & bring on contraction within a safe time; the unavoidable increase of salivary & occlusory, when salivary & occlusory become unprop, have nearly caused its abandonment. Therefore, even supposed to justify its indiscriminate use in all cases of accidental hemorrhage at the point supplied by F. 10. 10; as an evidence of which, he even advises the mechanic to be captured with the male culture, when the other was not within the finger.





-ger complaint of a more imaginary than real.

The method to be adopted in turning has nothing peculiar, with the exception of which every accoucheur is supposed to be acquainted. It is desirable that this operation be performed as quickly as possible after the evacuation of the uterus; as much of which as can should be retained. Rushing either in entering the uterus or extracting the child is on no account usual; but throughout, the most perfect gentleness should be observed; rather refusing with the pains, if any be present. - The patient being removed, no time should be lost in securing the complete tonic collection of the uterus.

Particular situations of the uterus a child may under the force of peristalsis; and the indications for this procedure are nearly the same as in the case of postpartum labour.

The symptoms of every system exhaustion being present the prospect of instant delivery has been made a question. - Mr Burns is decidedly of opinion that the woman has the best chance of recovery, who is speedily and cautiously delivered. - He says, whether she has more than a woman in seven four and twenty hours. - Dr Dewees supposes the expediency of immediate delivery to depend on the continuance of the flooding. - If this has subsided, it will be safest for the patient to suspend the operation for a while at least. Another important question occurs in this state, relative to the propri-

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sty of stimulants. By some their employment has been objected, to, on account of
 fear of the most fatal exhaustion. Though by no means an advocate
 for their indiscriminate use, I am so little disposed to believe, they are so
 essential in the advanced stages of this malady. To the stimulating
 applications already enumerated, should now be added the moderate admini-
 stration of some mild cathartics, light nourishment &c. Complete syncope is
 also an alarming symptom, when it occurs in the advanced period of
 flooding, though by some it is hailed as a certain epistemic. The danger
 to be apprehended from this occurrence will be in proportion to the extent
 of the discharge, proceeding this for some women, from an extraordinary size of
 constitution, faint in the hope of a free course of blood; and in them though
 not a desirable symptom, it is not dangerous. Stimulants however would be of ma-
 nifest injury; as the fainting does not arise from the effect of the flooding on
 the vascular system; but essentially from a derangement of the nervous energy.
 I intend to conduct the patient safely through these scenes of exhaustion, re-
 quires the utmost discrimination, - a degree of acumen to be acquired only by
 much experience, united with a sound judgment. The results of the former and
 the dictates of the latter, are in favour of a cautious administration of irritants under
 such circumstances. - Thus have I sketched what seems necessary to be said on acci-
 dental hæmorrhage, all of which I most respectfully submit for examination. -

